maximum of four weekly injections of < 45 mg; but this limit only applies to her current project licence. The restriction is not absolute but is due to her proposal; it can be higher or lower in a different proposal according to the study design.

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Occupational medicine: the way ahead
Editor—We have read with interest the series of articles on Occupational medicine: the way ahead. It is indeed an exciting period of tran-
sition for occupational medicine. With employers increasingly being made aware of their legal responsibilities, and both employ-
eres and employers becoming better informed about health, safety, and environ-
mental issues, there is a window of opportu-
nity in which to ensure that future service provisions fully meet the challenge, and meets the needs not only of our own nation but the wider global community.

As experts in our field we need to ensure that we are able to provide the best service possible in what is a constantly evolving and complex discipline. Within this requirement is a need to realise the limits of our own competence and to be willing and able to seek advice from others when necessary. Even for occupational physicians working in a specific type of industry, there is a constant need to expand and update our knowledge base, with the introduction of new products and processes, and the chal-
enge of new legislation. For many practi-
tioners the need to generate income keeps us in contact with a much wider range of occupational health and safety problems. We clearly have responsibility for both the physical and psychological wellbeing of those within the workplace, but are also required to consider the impact of psychoso-
cial issues on health, and increasingly the environmental impact of industrial problems on the general population.

Disasters such as the Braer tanker, Bhopal, and Chernobyl illustrate the poten-
tial of consequences of both technol-
gy and health matters. There is always the danger of similar events occurring when we are ill informed of all the issues, or are not keeping pace with new developments within our field. We should also be ensuring that progress within the field of occupational medicine is not limited to our industry or locality, but that information is shared across a wider industrial community and translated into formulae which can be practically applied in the developing world.

Epidemiology has provided us with valu-
able information about the distribution and determinants of many occupational diseases, enabling us to assess the risk and the risk limitation measures developed. Studies of occupational groups have often been limited by poor quantification of exposure, due to lack of assessment skills, or appropriate devices, or failure to recognise the need for exposure assessment within study design. Liaison with occupational hygienists, and other specialists such as mineral-
ogists and chemists, can ensure that epidemiological data is used appropriately and efficiently, where deficiencies exist our combined knowledge can be helpful in developing new technique. Elements of good study design and interpretation of complex data can be just as important as the actual findings. They are helping us to make better decisions with an expert statistician. The establishment of clear exposure-response relations by adequate data collection and analysis will assist future planning of services and prioritising of resources, by targeting risks appropriately.

The emphasis on individual exposures and susceptibility highlights the need for techniques and models which are better able to measure such variations. The development of biomarkers to detect the impact of expo-
sure on individual people at a cellular level is an important way ahead, and tests which have direct relevance in the workplace must be the aim. Physiologically based pharma-
kine models can allow us to explore the impact of toxic substances on human sys-
tems, rather than relying on extrapolation from animal studies in which routes of metabolism and tumour susceptibility often show great variation between species. Occupational hygienists and toxicologists are leading the way in this field, and we have much to contribute in our own fields of dis-
waste mechanisms, and workplace implica-
...
On a more practical level, we should strive to develop quality systems within occupational medicine. There is a need to ensure that our practices and policies are in line with recognised standards and when these do not exist, to pool our knowledge with other specialists to develop such systems. Close liaison with occupational hygienists can help to ensure the implementation of cost effective programmes and compliance with expanding legislation. Stress in the workplace is a topic of much concern and is recognised to be multifactorial in origin, with aspects both of the physical and psychological environment contributing. The role of the ergonomist in advising on workplace design and work processes and the contribution of occupational psychologists in considering interpersonal and individual management styles and coping strategies should be recognised.

The information which is available from toxicologists and other related scientists on the subject of workplace and environmental exposures can ensure that we are able to give accurate advice on the true impact of events on a population, and can help to reduce or avoid the economic disarrangement, limit costs of the current event, and potentially avoid heavy litigation costs at a future date. In the main, we are already working in multidisciplinary teams within the workplace, working closely with occupational health nurses, safety practitioners, personnel managers, and—for example, physiotherapists. In seeking to develop our specialty we cannot afford to be isolationists. We have a natural role within teams, and can enhance our role and knowledge base by working with and seeking the advice of those from a wider range of disciplines.

Although such multidisciplinary groups are currently rare, they do exist, and there are individual specialists around the country who can provide similar advice. The opportunity of working in such an environment has enhanced my knowledge of the scope and complexity of the field of occupational medicine. As physicians, our skills are complementary to all of these disciplines, and we have a valuable part to play in this multidisciplinary setting. We are likely to find that such a contribution increases our job satisfaction, enhances our skills, and establishes a valuable input into the future of our specialism, which is unique within the medical profession.

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**NOTICES**

3rd Annual Western Retreat: Practical Primary Care. 17–19 November 1996. The Silverado, Napa, California

This continuing medical education course is sponsored by Scripps Clinic and Research Foundation and designed for physicians interested in updating their clinical knowledge on various topics about primary care and internal medicine. The combination of lectures and discussion in a relaxed atmosphere will enhance the learning experience. The course will offer 12 hours of category 1 CME credit.

For further information contact: Department of Academic Affairs, 403C, Scripps Clinic and Research Foundation, 10666 N Torrey Pines Road, La Jolla, CA 92037, USA. Tel (619) 554-8556; Fax (619) 554-6310.

**OSHA '96 Health and safety conference and exhibition. 2–4 December 1996. Harrogate, Yorkshire**

Europe's leading professional health and safety body's prestigious annual conference and exhibition will be held at the Harrogate International Centre, the Institution of Occupational Safety and Health's conference takes as its theme this year: *Duty of care.*

A strong line up of high calibre speakers is now being finalised for the conference. The keynote address at OSH '96 will be delivered by David Eves, deputy director general, Health and Safety Executive. Other speakers already confirmed for the three day event include: Owen Tudor of the TUC, who will concentrate on empowerment of the safety practitioner; Alan Rickman of Willis Corroon Hinton, focusing on health, safety and environmental management; and Nick Burraston of Powergen, who will discuss benchmarking.

The conference is structured around formal presentations covering a comprehensive range of subjects as well as a series of more informal workshop sessions. Workshop topics will be:
- Continual improvement of project process (CIPP)
- Construction (design and management) regulations
- Accident investigation systems
- Counselling in the workplace
- Cost/benefit analysis
- Role of the expert witness
- BS 8800—safety management
- IOSH membership and new OSH qualifications

For further information, contact: Deborah Fisher, Tel +44 (116) 257 1399, ext 109, e-mail: cpdevnts@iosh.co.uk. The programme will appear on OSH's home page (http://www.iosh.co.uk) by the end of June.

Conference delegates will have free access to OSH's exhibition. More details are available from Tony Bond or Dave Bishop at Paramount Exhibitions, Tel +44 (0) 181 207 5599.

**Clinical haematology and oncology: 1997. 17–20 February 1997. Sheraton Grande Torrey Pines Hotel, La Jolla, CA, USA**

This continuing medical education conference is sponsored by Scripps Clinic and Research Foundation and designed for haematologists, medical oncologists, internists, pathologists, and paediatricians interested in the diagnosis and management of haematological and oncological disorders. An outstanding faculty from across the country has been assembled to discuss various aspects of these fields, to aid clinicians in sorting out the important from the trivial, and to help identify those recent advances which will withstand the test of time. 26 Hours category 1 CME credit available.

For further information contact: Department of Academic Affairs, 403C, Scripps Clinic and Research Foundation, 10666 N Torrey Pines Road, La Jolla, CA 92037, USA. Tel (619) 554-8556; Fax (619) 554-6310.

**Continuing education program schedule. 1996–97 of the Northwest Center for Occupational Health and Safety, Department of Environmental Health, University of Washington, Seattle, WA, USA**

16–18 October Northwest occupational health conference: quality in occupational health and safety.
23 October Health and safety programs for the information age (Governor's safety and health conference, Spokane, WA).
7–8 and 12–13 November NIOSH 596: ergonomics of occupational hand-arm and whole-body vibration.
5 December Scientists in the courtroom: the role of the expert witness.
16 January 1997 Toxicology for non-toxicologists.
29–31 January Hazardous waste annual refreshers.
24–28 February Non-ionising radiation.
20 March Health and safety programs in the workplace.
21 March Advances in occupational and environmental medicine.
3–4 April Agricultural safety and health (Yakima, WA).
16–18 April Managing hazardous materials events (Spokane, WA).
8 May Advances in ergonomics: overview of the science.
9 May Advances in ergonomics: improved techniques for practitioners.
5 June Health hazards in machining operations.
16–20 June Sampling and evaluating airborne asbestos dust.
For further information: (206) 543-1069; e-mail: ce@u.washington.edu.

**Epidemiology and prevention of infectious diseases. 6–8 February, 1997. Fairmont Hotel Atop Nob Hill, San Francisco, California**

This programme provides an overview of the scope and methods used in infectious disease epidemiology and research, the unique aspects of hospital epidemiology and infection control, and the epidemiology and prevention of specific infectious diseases. The programme is designed for all practitioners in the disciplines of epidemiology, public health, health administration, medicine, nursing, and related professions.

The format features lectures and discussion with faculty. Topics to be covered include:
- HIV Infection
- Tuberculosis
- Sexually transmitted disease
- Meningitis
- Lyme disease
- Haemophilus influenzae infection

Chaired by John E Conte, Jr, MD, this programme is presented by the Department of Epidemiology and Biostatistics of the University of California School of Medicine at San Francisco. The programme is sponsored by UCSF's Office of Continuing Medical Education.

UCSF is accredited by the Accreditation Council for Continuing Medical Education. This programme will meet the criteria for category 1 credit.

For further information, contact: The Office of Continuing Medical Education, Room MCB-630, University of California, San Francisco, California 94143-0742, (415) 476-4251.